UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND						
1 Date of Request: 2 Seria			al/Patent #10/519841			
3 Please refund the following fee(s):		4 PAPE NUME		5 DATE FILED	6 AMOUNT	
Filing		- /	_	1-12-05	\$ 100	
Amendment					\$	
Extension of Time				:	\$	
Notice of Appeal/Appeal					\$	
Petition					\$	
Issue					\$	
Cert of Correction/Termina	l Disc.				\$	
Maintenance					\$	
Assignment					\$	
Other					\$	
		7 TOTAL AMOUNT S /0 O				
		8 TO BE REFUNDED BY:				
10 REASON:		Treasury Check				
Overpayment				redit Dep	osit A/C #:	
Duplicate Payment			, [50	030	
No Fee Due (Explanation):		<u></u>				
11 REFUND REQUESTED BY:						
TYPED/PRINTED NAME: # JOHNSON TITLE: MANAGERAL PHONE: 308940						
SIGNATURE: Mylluwww PHONE: 3084140						
OFFICE: ************************************						
THIS SPACE RESERVED FOR FINANCE USE ONLY:						
APPROVED: DATE:						
						

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

FORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B